MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET FOR USE WITH FORM PTO-875) SERIAL NO. STATE STATE STATE OF STATE O

CLAIMS AFTER AFTER
131 AMENDMENT 2nd AMENDMENT AS FILED IND. DEP. IND. DEP. IND DEP DEP. IND. IND. DEP. IND. DEP. A711 3Œ Ø1 (D) @3 OTAL TOTAL OTAL TOTAL DEP. OTAL The wife NAME OF THE OWNER, OWNE TOTAL TO-1350 (3-78)

·May be used for additional claims or amendments

U.S. DEPARTMENT of COMMERCE Fatent and Trademysk Office